

# Application For Perpetual Monument Maintenance Grant

Authority: 1990 PA 345

Michigan Department of Labor & Economic Growth Bureau of Construction Codes & Fire Safety Office of Land Survey and Remonumentation 6546 Mercantile Way, P.O. Box 30704 Lansing, Michigan 48909 Telephone: (517) 241-6321 or Facsimile: (517) 241-6301		<b>Grant #152005-480</b> __ __ <b>MAIN Mail Code:</b> <b>Index: 02935      AOBJ: 1218</b>			
		<b>Application Received:</b> _____			
		<b>Reviewed by Analyst:</b> _____			
		<b>Reviewed by Director:</b> _____			
		<b>Approved By Director:</b> _____			
<b>Applicant (Grantee County)</b>  <b>County of</b> _____  <b>County's Federal I.D. Number</b> _____  <b>#</b> _____		<b>A.</b>	<b>Grantee's Address For Payments</b>     		
<b>B.</b>	<b>County Grant Administrator</b>  Name: _____ Address: _____ City, State, Zip: _____ Telephone: _____ FAX: _____ E-Mail: _____		<b>C.</b>	<b>County Representative</b>  Name: _____ Address: _____ City, State, Zip: _____ Telephone: _____ FAX: _____ E-Mail: _____	
<b>D.</b>	<b>Capability To Perform The Work Program Specified (<u>Must</u> Check This Box):</b>  We have the capability to perform the work program specified through a licensed professional surveyor on staff and/or through a contract with a licensed professional surveyor to perform the remonumentation survey.				
<b>E.</b>	<b>Financial Summary Of State Grant And County Funds (If Any):</b>				
	<b>State Grant</b>	<b>County Cash Contribution</b>	<b>Total Annual Project Budget</b>		
<b>F.</b>	<b>We certify that the information in this grant application is correct to the best of our knowledge.</b>				
_____ Original ink signature of County Grant Administrator		_____ Original ink signature of County Representative			
_____ Date		_____ Date			

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**SUMMARY OF WORK PROGRAM FOR GRANT YEAR 2005**  
**(Specify the individual corner codes proposed for the 2005 work program by Survey Township)**

<b>Item G</b>	<b>SPECIFY THE INDIVIDUAL CORNER CODE(S) BY SURVEY TOWNSHIP(S):</b> (attach additional pages to the application if necessary)									
<b>Maintenance Of Markers</b>	DOLLAR AMOUNT MUST BE THE SAME AS AMOUNT SHOWN FOR ITEM G ON PAGE 3 \$ _____			Number of <b>MARKERS TO BE MAINTAINED:</b> _____						
<b>Item H</b>	<b>SPECIFY THE INDIVIDUAL CORNER CODE(S) BY SURVEY TOWNSHIP(S):</b> (attach additional pages to the application if necessary)									
<b>Corners For Additional Research</b>	DOLLAR AMOUNT MUST BE THE SAME AS AMOUNT SHOWN FOR ITEM H ON PAGE 3 \$ _____			Number of Corners Requiring <b>ADDITIONAL RESEARCH:</b> _____						
<b>Item I</b>	<b>SPECIFY THE INDIVIDUAL CORNER CODE(S) BY SURVEY TOWNSHIP(S):</b> (attach additional pages to the application if necessary)									
<b>Corners To Be Re-Monumented</b>	DOLLAR AMOUNT MUST BE THE SAME AS AMOUNT SHOWN FOR ITEM I ON PAGE 3 \$ _____			Number of Corners to be <b>RE-MONUMENTED:</b> _____						
<b>Item J</b>	<b>SPECIFY THE INDIVIDUAL CORNER CODE(S) BY SURVEY TOWNSHIP(S):</b> (attach additional pages to the application if necessary)									
<b>Points To Have Coordinates Set (X, Y ad Z)</b>	DOLLAR AMOUNT MUST BE THE SAME AS AMOUNT SHOWN FOR ITEM J ON PAGE 3 \$ _____			Number of Points to have <b>COORDINATES SET:</b> _____						
<b>Item K</b>	<b>SPECIFY THE INDIVIDUAL CONTROL STATION(S) BY SURVEY TOWNSHIP(S):</b> (attach additional pages to the application if necessary)									
<b>Existing Control Stations To Be Recovered</b>	DOLLAR AMOUNT MUST BE THE SAME AS AMOUNT SHOWN FOR ITEM J ON PAGE 3 \$ _____			Number of <b>CONTROL STATIONS TO BE RECOVERED:</b> _____						
<b>Item G</b>	<b>+</b>	<b>Item H</b>	<b>+</b>	<b>Item I</b>	<b>+</b>	<b>Item J</b>	<b>+</b>	<b>Item K</b>	<b>=</b>	<b>Total Annual Project Budget</b>

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### 2005 DETAIL BUDGET

SHOW EXPENDITURES BY WORK PROGRAM CATEGORY AND LINE ITEM. THE TOTALS FOR ITEMS G, H AND I AT THE BOTTOM OF THIS PAGE MUST BE THE SAME AS THE TOTALS FOR ITEMS G, H AND I ON PAGE 2 OF THIS APPLICATION.

Line Item Expenditures	WORK PROGRAM CATEGORIES					Line Item Total (add across)
	Item G	Item H	Item I	Item J	Item K	
	Maintenance Of Markers	Additional Corner Research	Corners To Re-Monument	Points To Have Coordinates Set	Control Stations To Recover	
Peer Group (PG)						
Contractual Survey Services (CSS)						
Supplies and Materials (S/M)*						
Equipment (E)*						
Administration (A)*						
<b>Total</b> (Adding Down) For G, H, I, J, & K On Page 3 Must Be The Same Dollar Amount Shown On Page 2	Item G (Add Down)	Item H (Add Down)	Item I (Add Down)	Item J (Add Down)	Item K (Add Down)	Total Annual Project Budget

**\* PROVIDE A DETAILED ITEMIZED LISTING OF THE SPECIFIC ITEMS OF EXPENDITURE AND THE SPECIFIC DOLLAR AMOUNTS FOR EACH ITEM FOR SUPPLIES & MATERIALS, EQUIPMENT AND ADMINISTRATION ON PAGE 4 OF THIS APPLICATION – “BUDGET ADDENDUM.”**

AMOUNT and SOURCE(S) OF REVENUE (identify the County Cash source):	<b>State Grant: \$</b>
Source(s) of Revenue:	Amount of County Cash:
_____	\$ _____
_____	\$ _____
<b>TOTAL COUNTY CASH CONTRIBUTION (if any): + \$</b> _____	
<b>TOTAL ANNUAL PROJECT BUDGET: \$</b> _____	

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<b>BUDGET ADDENDUM FOR ITEMIZING SUPPLIES AND MATERIALS, EQUIPMENT AND ADMINISTRATION</b> (Attach additional pages to the application if necessary)
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<b>TOTAL DOLLAR AMOUNTS ON THIS PAGE MUST BE THE SAME AS THE LINE ITEM TOTAL ON PAGE 3</b>
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<b>Supplies and Materials:</b>  <table style="width: 100%;"> <tr> <th style="text-align: center; width: 50%;"><u>Item</u></th> <th style="text-align: center; width: 50%;"><u>Dollar Amount</u></th> </tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> </table>	<u>Item</u>	<u>Dollar Amount</u>	_____	\$ _____	_____	\$ _____	_____	\$ _____	_____	\$ _____	_____	\$ _____	<b>THIS LINE ITEM TOTAL MUST BE THE SAME AS THE LINE ITEM TOTAL AMOUNT ON PAGE 3</b>          Total <b>Supplies and Materials:</b> \$ _____
<u>Item</u>	<u>Dollar Amount</u>												
_____	\$ _____												
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<b>Equipment:</b>  <table style="width: 100%;"> <tr> <th style="text-align: center; width: 50%;"><u>Item</u></th> <th style="text-align: center; width: 50%;"><u>Dollar Amount</u></th> </tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> </table>	<u>Item</u>	<u>Dollar Amount</u>	_____	\$ _____	_____	\$ _____	_____	\$ _____	_____	\$ _____	_____	\$ _____	<b>THIS LINE ITEM TOTAL MUST BE THE SAME AS THE LINE ITEM TOTAL AMOUNT ON PAGE 3</b>          Total <b>Equipment:</b> \$ _____
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<b>Administration:</b>  <table style="width: 100%;"> <tr> <th style="text-align: center; width: 50%;"><u>Item</u></th> <th style="text-align: center; width: 50%;"><u>Dollar Amount</u></th> </tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____</td><td style="text-align: right;">\$ _____</td></tr> </table>	<u>Item</u>	<u>Dollar Amount</u>	_____	\$ _____	_____	\$ _____	_____	\$ _____	_____	\$ _____	_____	\$ _____	<b>THIS LINE ITEM TOTAL MUST BE THE SAME AS THE LINE ITEM TOTAL AMOUNT ON PAGE 3</b>          Total <b>Administration:</b> \$ _____
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_____	\$ _____												

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